RECEIVED

Date Received
Official Use Only

MAR 3 0 2011

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

A M E N D M E N T TIAPR -1 PM 1:55 A Public Document

CITY OF MILLBRAE ADMIN DEPT.

Please type or print	in ink.		
NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Papan		Virginia	Irene
1. Office, Agenc	y, or Court		
Agency Name			
City Council			
Division, Board, De	epartment, District, if applicable	Your Position	
		Council Member	
► If filing for multip	ple positions, list below or on an attachment.		
Agency: see atta	ached list	Position;	
2 Jurisdiction	of Office (Check at least one box)		
☐ State	or officer at least one boxy	☐ Judge (Statewide Jurisdiction)	
	00		- 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100
· ·	ae	·	
	ement (Check at least one box)	_	
	period covered is January 1, 2010, through Dec	ember 31, Leaving Office: Date Left (Check one)	
	-or- covered is/, through Dece	· · · · · · · · · · · · · · · · · · ·	uary 1, 2010, through the date of
2010.	through book	leaving office.	•
Assuming Off	rice: Date/	 The period covered is of leaving office. 	/, through the date
☐ Candidate: E	lection Year Office sou	ight, if different than Part 1:	
4. Schedule Sui	mmary		
	schedules or "None."	► Total number of pages including this	cover page:
Schedule A-1	Investments – schedule attached	Schedule C - Income, Loans, & Bus	iness Positions – schedule attached
=	- Investments - schedule attached	Schedule D - Income - Gifts - sche	
🔀 Schedule B -	Real Property - schedule attached	Schedule E - Income - Gifts - Trav	el Payments - schedule attached
	or-		
	☐ None - No reporta	ble interests on any schedule	
_	allocated screenings is true and complete. I ack		
i ceruiy under per	nalty of perjury under the laws of the State o	Camorna C	
Date Signed 3	30/11	Signa	
- 7	(month, day, year)		

Form 700: Statement of Economic Interests Cover Page

Virginia I. Papan

Office, Agency or Court: Multiple Positions List

City Council, City of Millbrae, Council Member

City/County Association of Governments of San Mateo County:

- Congestion Management & Environmental Quality Committee Member
- Legislative Committee Member

Peninsula Traffic Congestion Relief Alliance, Board of Directors Member

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

>	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY			
	Apple Inc.	Gilead Sciences			
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY			
	Computer	Biotech			
	FAIR MARKET VALUE	FAIR MARKET VALUE			
	S2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000			
	S100,001 - \$1,000,000 Over \$1,000,000	5100,001 - \$1,000,000 Over \$1,000,000			
	NATURE OF INVESTMENT	NATURE OF INVESTMENT			
	Stock Other (Describe)	Stock Other(Describe)			
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)			
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:			
		<u> </u>			
	ACQUIRED DISPOSED	ACQUIRED DISPOSED			
_	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY			
	JP Morgan Chase	Johnson & Johnson			
	or Worgan Chase	JOHNSON & JOHNSON			
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY			
	Financial Services	Consumer Products			
	FAIR MARKET VALUE	FAIR MARKET VALUE			
	S2,000 - \$10,000 X \$10,001 - \$100,000	☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000			
!	S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000			
	NATURE OF INVESTMENT	NATURE OF INVESTMENT			
- 1	X Stock Other (Describe)	Stock Other(Describe)			
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499			
	O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)			
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:			
	ACQUIRED DISPOSED	ACQUIRED DISPOSED			
•	NAME OF BUSINESS ENTITY	Verification			
	Pepsico				
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Print Name Virginia I Papan			
	Beverages	Office, Agency			
ı	FAIR MARKET VALUE	Managara Taran Managara Andrews Tarana			
Į	\$2,000 - \$10,000 \$10,001 - \$100,000	Statement Type 2010/2011 Annual Assuming Leaving			
	\$100,001 - \$1,000,000 Over \$1,000,000	(yr) Annual Candidate			
ı	NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have			
_	X Stock Other	reviewed this statement and to the best of my knowledge the information			
1	(Describe)	contained herein and in any attached schedules is true and complete.			
ĺ	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	i certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
١	F APPLICABLE, LIST DATE:	Date Signed 3/30/1\			
		(month, day, year)			
•	ACQUIRED DISPOSED	Signature			
^	omments:				
•	UNING 1911 W				

SCHEDULE A-1 Investments

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

				_		_		_
Α	M	F	N	n	М	F	Ν	Т

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY				
Ford Motor Corp	Cisco Systems Inc				
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY				
Autos	Communications				
FAIR MARKET VALUE	FAIR MARKET VALUE				
	◯ \$2,000 - \$10,000				
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000				
NATURE OF INVESTMENT	NATURE OF INVESTMENT				
Stock Other	Stock Other (Describe)				
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)				
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:				
<u>1 / 12 / 10 / 10</u>	<u>/ / 10 </u>				
ACQUIRED DISPOSED	ACQUIRED DISPOSED				
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY				
Freddie Mac	Fannie Mae				
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY				
Mortgages	Mortgages				
FAIR MARKET VALUE	FAIR MARKET VALUE				
	│ 				
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000				
NATURE OF INVESTMENT	NATURE OF INVESTMENT				
Stock Other (Describe)	Stock Other(Describe)				
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)				
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:				
6 / 18 / 10 / 10	3 / 2 / 10 3 / 20 / 10				
ACQUIRED DISPOSED	ACQUIRED DISPOSED				
► NAME OF BUSINESS ENTITY Walt Disney Co.	Verification				
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Print Name Virginia I Papan				
Entertainment	Office, Agency				
FAIR MARKET VALUE	1				
■ \$2,000 - \$10,000 ■ \$10,001 - \$100,000	Statement Type 2010/2011 Annual Assuming Leaving				
S100,001 - \$1,000,000 Over \$1,000,000	Annual Candidate				
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have				
Stock	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.				
Partnership () Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of				
O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:	California that the foregoing is true and correct.				
n out Madebred Flot Attra	Date Signed (d)(5) (year)				
<u> </u>	(d)(5) , year)				
ACQUIRED DISPOSED	Signature				
	/				

Comments: __

FPPC Form 700 Amendment (2010/2011) Sch. A-1 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY			
Procter & Gamble	Zagg			
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY			
Consumer Products	Phone Audio Accessories			
FAIR MARKET VALUE	FAIR MARKET VALUE			
S2,000 - \$10,000 X \$10,001 - \$100,000				
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000			
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock ☐ Other			
(Describe) Partnership () Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)			
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:			
/	<u>12 / 31 / 10 / 10</u>			
ACQUIRED DISPOSED	ACQUIRED DISPOSED			
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY			
Microsoft	Las Vegas Sands Corp			
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY			
Software	Gambling			
FAIR MARKET VALUE	FAIR MARKET VALUE			
▼ \$2,000 - \$10,000	S2,000 - \$10,000 X \$10,001 - \$100,000			
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000			
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other			
(Describe)	(Describe)			
Partnership C Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)			
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:			
<u> </u>	3 / 31 / 10 // 10			
ACQUIRED DISPOSED	ACQUIRED DISPOSED			
NAME OF BUSINESS ENTITY	Verification			
Verizon Communications	Print Name Virginia I Papan			
GENERAL DESCRIPTION OF BUSINESS ACTIVITY				
Communications	Office, Agency or Court			
FAIR MARKET VALUE	Statement Type 🗵 2010/2011 Annual 🗌 Assuming 🔲 Leaving			
	Annual Candidate			
S100,001 - \$1,000,000 Over \$1,000,000	! have used all reasonable diligence in preparing this statement. I have			
NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information			
X Stock ☐ Other(Describe)	contained herein and in any attached schedules is true and complete.			
Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
IF APPLICABLE, LIST DATE:	Date Signed 3/30/11			
3 / 31 / 10 / 10	Imonih, day, year)			
ACQUIRED DISPOSED	(d)(5)			
·	Signatu			

Comments: _

SCHEDULE B

Interests in Real Property (Including Rental Income)



AMENDMENT

➤ STREET ADDRESS OR PRECISE LOCATION	➤ STREET ADDRESS OR PRECISE LOCATION			
4 Crossley Court	73-710 Paseo			
CITY	CITY			
Sacramento, CA	Palm Desert, CA			
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:			
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000			
\$10,001 - \$100,000 ACQUIRED DISPOSED	X \$100,001 - \$1,000,000 ACQUIRED DISPOSED			
Over \$1,000,000	Over \$1,000,000			
NATURE OF INTEREST	NATURE OF INTEREST			
✓ Ownership/Deed of Trust	☑ Ownership/Deed of Trust ☐ Easement			
Leasehold Other	Leasehold			
110, Mindaging Culti	ris, ternasung Other			
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED			
☐ \$0 - \$499 ☐ \$500 - \$1,000 🔀 \$1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000			
S10,001 - \$100,000 OVER \$100,000	▼ \$10,001 - \$100,000			
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.			
mediae of \$10,000 of more.				
	Carolyn Moorten dba, Vivant Interior Design			
* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:	Comments:			
ĺ				
NAME OF LENDER*	Verification			
Ì	Print Name Virginia I Papan			
ADDRESS (Business Address Acceptable)	Print Name Virginia 11 apari			
A D S A LOS OF A S A S A S A S A S A S A S A S A S A	Office, Agency			
	or Court			
BUSINESS ACTIVITY, IF ANY, OF LENDER	Statement Type			
INTEREST RATE TERM (Months/Years)	I have used all reasonable diligence in preparing this statement. I have			
% [] None	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.			
HIGHEST BALANCE DURING REPORTING PERIOD	I certify under penalty of perjury under the laws of the State of			
\$500 - \$1,000 \$1,001 - \$10,000	California that the foregoing is true and correct.			
\$10,001 - \$100,000 OVER \$100,000	Date Signed 3/39/11			
	(d)(5)			
☐ Guarantor, if applicable	Signature			
	Olgimizato -			
I				

SCHEDULE B Interests in Real Property (Including Rental Income)



AMENDMENT

➤ STREET ADDRESS OR PRECISE LOCATION 2160 Geer Road CITY Turlock, CA FAIR MARKET VALUE \$2,000 - \$10,000 \$2,000 - \$10,000 \$2,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000 \$3,000 - \$10,000	
CITY Turlock, CA FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 100 110 CITY Daly City, CA FAIR MARKET VALUE IF APPLICABLE, I \$2,000 - \$10,000	
Turlock, CA FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 Turlock, CA FAIR MARKET VALUE IF APPLICABLE, IIST DATE: \$2,000 - \$10,000	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: FAIR MARKET VALUE IF APPLICABLE, I \$2,000 - \$10,000	
\$2,000 - \$10,000 \$2,000 - \$10,000	
NATURE OF INTEREST NATURE OF INTEREST	
✓ Ownership/Deed of Trust ☐ Easement ✓ Ownership/Deed of Trust ☐ Easement	
Leasehold Other Leasehold C	Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED IF RENTAL PROPERTY, GROSS INCOME RECEIVED	
	- \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000 ☐ OVER \$100,000	
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. SOURCES OF RENTAL INCOME: If you own a 10% interest, list the name of each tenant that is a si income of \$10,000 or more.	
* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard	
to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:	
NAME OF LENDER*	
Print Name Virginia I Papan	
ADDRESS (Business Address Acceptable) Office, Agency or Court	
BUSINESS ACTIVITY, IF ANY, OF LENDER Statement Type ■ 2010/2011 Annual Assur	ming Leaving
INTEREST RATE TERM (Months/Years) I have used all reasonable diligence in preparing this	
reviewed this statement and to the best of my knowled contained herein and in any attached schedules is t	rue and complete.
HIGHEST BALANCE DURING REPORTING PERIOD I certify under penalty of perjury under the law California that the foregoing is true and correct	s of the State of
□ \$500 - \$1,000 □ \$1,001 - \$10,000 □ 3 30 /U	•
S10,001 - \$100,000 OVER \$100,000 Date Signed	
Guarantor, if applicable Signature	

FPPC Form 700 Amendment (2010/2011) Sch. B FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

		<u></u>			
NAME OF SOUR			► NAME OF SOURCE	E	
Bay Area Cou	ıncil		_		
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Busines	ss Address Acceptal	ble)
		50 San Francisco, CA	_		
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	TY, IF ANY, OF SOL	JRCE
Conference C)rganizer		_		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 , 6 , 11	<u>\$ 95</u>	Conference Reg	-	\$	
	\$		- 1	\$	
	\$		-	s	
► NAME OF SOURCE	E		► NAME OF SOURCE	E	
ADDRESS (Busines	ss Address Acceptabl	(e)	ADDRESS (Busines	s Address Acceptab	ole)
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	TY, IF ANY, OF SOL	JRCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$		_ /	\$	
	\$		_	\$	
	\$		_ /	\$	
► NAME OF SOURCE	E		Verification		
ADDRESS (Busines	s Address Acceptabl	е)	Print Name Virgin	ia I Papan	
BUSINESS ACTIVIT	Y, IF ANY, OF SOUI	RCE	Office, Agency		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)			nual Assuming Leaving
DATE (IIIIII dayy)	VALUE	DESCRIPTION OF GIFT(6)	1 1	Annual	<u> </u>
	\$		 reviewed this statem 	ent and to the bes	n preparing this statement. I have t of my knowledge the information schedules is true and complete.
	\$		1 1	alty of perjury u	under the laws of the State of
	\$		Date Signed (d)(5)	30/11	
			Signature .		

Comments: _____